

KONRAD RAYNES VICTOR & MANN LLP

315 S. Beverly Drive, Suite 210
Beverly Hills, California 90212

Telephone: (310) 556-7983
Facsimile: (310) 556-7984

FAX COVER SHEET

RECEIVED
CENTRAL FAX CENTER

NOV 05 2003

**PLEASE DELIVER THIS FACSIMILE
TO EXAMINER MOHAMMAD ALI**

OFFICIAL

TO: Commissioner for Patents
Attn: Examiner Mohammad Ali
Group Art Unit 2177
Patent Examining Corps
Facsimile Center
Washington, D.C. 20231

FROM: David W. Victor

OUR REF: 0018.0059
TELEPHONE: 310-556-7983

Total pages, including cover letter: 12

PTO FAX NUMBER 1-703-746-7238

If you do NOT receive all of the pages, please telephone us at 310/556-7983, or fax us at 310/556-7984.

Title of Document Transmitted: AMENDMENT

Applicant: T.W. Bish et al.
Serial No.: 09/436,506
Filed: November 9, 1999
Group Art Unit: 2177
Docket No.: TU999036

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on November 5, 2003

By: 
Name: David W. Victor

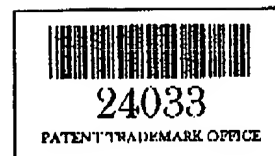
FORM PTO-1083

PATENT
TU999036
0018.0059IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
 T.W. Bish et al.)
 Serial No.: 09/436,506)
 Filed: November 9, 1999)
 For: METHOD, SYSTEM, AND PROGRAM)
 FOR ACCESSING DATA FROM)
 STORAGE SYSTEMS)

Examiner: Mohammad Ali

Art Unit: 2177



Sir:

Transmitted herewith in the above-identified application is an:

☒ Amendment 9 pages.
☒ No additional fee is required.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	27	MINUS 27	=	0	x	\$0	OR x 18 \$0
INDEP CLAIMS	3	MINUS 3	=	0	x	\$0	OR x 84 \$0
				+	\$	OR + 280 \$	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				TOTAL		\$0	OR TOTAL \$ -0-

— Please charge Deposit Account No. 09-0466 the amount of \$___ to cover the extension fee and also the amount of \$___ to cover the claim fee. A duplicate copy of this sheet is enclosed.
 — A check in the amount of \$___ to cover the extension fee is enclosed.
 — A check in the amount of \$___ to cover the filing fee is enclosed.
 — A check in the amount of \$___ to cover the petition fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0466. A duplicate of this sheet is enclosed.
☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

[Signature]
 David W. Victor
 Registration No. 39,867
 KONRAD RAYNES VICTOR & MANN, LLP
 315 S. Beverly Drive, Suite 210
 Beverly Hills, CA 90212
 (310) 556-7983 (voice)
 (310) 556-7984 (fax)

Dated: November 5, 2003

RECEIVED
CENTRAL FAX CENTER

NOV 05 2003

OFFICIAL

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being transmitted by facsimile to Mohammad Ali of the U.S. Patent and Trademark Office at 1-703-746-7238 on November 5, 2003.

[Signature]
David W. Victor11/5/03
Date